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APPLICANTS

T. ALLAN HAMILTON, SAN JOSE, CA;
Alan Grace, South San Francisco,, CA;

** CONTINUING DATA *****
None HP

** FOREIGN APPLICATIONS *****
None HP

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 03/02/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 10	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature HP	Initials		

ADDRESS
36257
PARSONS HSUE & DE RUNTZ LLP
655 MONTGOMERY STREET
SUITE 1800
SAN FRANCISCO , CA
94111

TITLE
SIGNAL RECEIVER HAVING WIDE BAND AMPLIFICATION CAPABILITY

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)